

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

*Jeff*

Group Art Unit: 3673  
Examiner: Lee, Jong-Suk (James)



Inventor: Wayne G. Floe, et al.  
Title: POWERED BOATLIFT WITH ELECTRONIC CONTROLS  
Serial No.: 10/645,245  
Filed: August 8, 2003  
Docket No.: 6605A

Date: May 18, 2005

Commissioner for Patents  
MS Amendment  
P O Box 1450  
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Sir:

Transmitted herewith is an Amendment for this Application. Applicant is a small entity.

EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d)) for the total number of months checked below:

Extension (months)	Fee for a small entity
<input checked="" type="checkbox"/> one month	\$ 60.00
<input type="checkbox"/> two months	\$ 225.00
<input type="checkbox"/> three months	\$ 510.00
<input type="checkbox"/> four months	\$ 795.00
<input type="checkbox"/> five months	\$ 1,080.00

Fee \$60.00

If an additional extension of time is required, please consider this a petition therefore.

- ☐ An extension for \_\_\_ months has already been secured and the fee paid therefore of \$\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

FEES

The fee for Claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

FEE FOR CLAIMS CALCULATION			
Claims Remaining After Amendment	Highest No. Previously Paid For	Rate	Additional Fee
Total Claims ____ -	(if < 20, enter 20) ____ = ____ X	\$18.00	\$
Independent Claims ____ -	(if < 3, enter 3) ____ = ____ X	\$86.00	\$
First Presentation of Multiple dependent claims if any +			\$
Filing fee calculation			\$ -0-

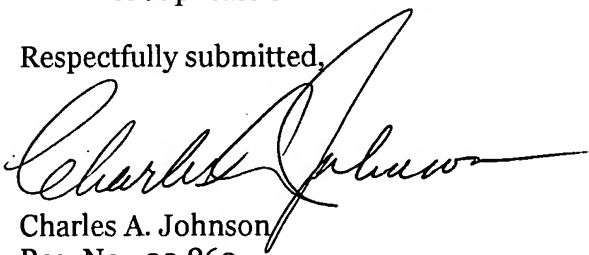
- ☐ Total additional fee for Claims required \$None.  
☐ No additional fee for claims is required.

FEE PAYMENT

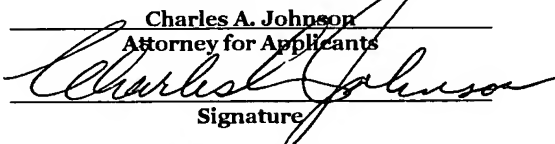
If any additional extension and/or fee or any additional fee for claims is required, please notify the undersigned Attorney for Applicants.

A duplicate of this transmittal is attached.

Respectfully submitted,

  
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I hereby certify that this correspondence is being deposited in the United States Postal Service as first class mail in an envelope addressed to: MS Amendment, Commissioner for Patents, Alexandria, VA 22313-1450 on May 18, 2005

\_\_\_\_\_  
Charles A. Johnson  
Attorney for Applicants  
  
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Signature  
\_\_\_\_\_  
May 18, 2005  
\_\_\_\_\_  
Date of Signature